







What Is m4RH?

The Mobile for Reproductive Health (m4RH) program is an automated, interactive, and on-demand system using short message service (SMS) or "text messaging", which is accessible from every mobile phone and across all cell phone providers. The m4RH system provides basic information about the full range of short-acting and longacting contraceptive methods and addresses common misconceptions. The text messages present information in a concise format consisting of two to three screens per method. Messages were developed using best practices for health communication programs, global guidance from the World Health Organization, country-specific national family planning guidelines, and assistance from local agencies.

Program Brief

Mobile for Reproductive Health Project: Kenya

FHI 360's Program Research for Strengthening Services (PROGRESS) project and the Kenya Division of Reproductive Health (DRH) are expanding access to information about family planning using text messages through a system called mobile for reproductive health (m4RH). A pilot project launched in 2010 has proven successful, and a more in-depth evaluation is beginning to determine how this informational approach can influence contraceptive use and behavior.

The DRH and PROGRESS launched the m4RH pilot with Marie Stopes International, PSI, and Family Health Options of Kenya. The project sought to evaluate the acceptability, feasibility, and potential behavioral impact of providing contraceptive information via text message on mobile phones. A person in Kenya can access the m4RH system from any mobile phone in the country by texting m4RH to the short code 4127. A similar pilot project began about the same time in Tanzania. See "What Is m4RH?" (left) for a description of the text message system. The U.S. Agency for International Development (USAID) funded this work. The technological partner was Text to Change.

Pilot Project Succeeds

During the Kenya pilot from January 2010 to June 2011, users made a total of 12,954 queries (4,817 unique users) to the m4RH system. Among all Kenyan users, the most popular contraceptive method queried was natural family planning (22%), followed by condoms (17%). Users in Kenya reported via SMS that they learned about m4RH through posters

placed in health facilities or clinics (22%); partners, relatives, and friends (30%); or community health workers (11%). Also, 33% of users reported that they learned of m4RH from the radio. During in-depth telephone interviews with 22 Kenyans, the m4RH users reported they were very satisfied with the program, saying the messages were easy to understand and informative.

Adolescents and young adults up to 29 years old were the most frequent users of m4RH, among those reporting their age. About 39% of users who reported their gender were men. Combined analysis of the Kenya and Tanzania data found that providing contraceptive information via this text message-based mobile phone system is an effective strategy for reaching the general public, including young people and men, and for influencing their contraceptive behavior. However, more research is needed to learn how to effectively link m4RH users to family planning services.

Ministry Leadership Expands Potential Reach

Since the 2010 launch by the DRH and the FHI 360 team, more partners in the country have taken an interest. In 2013, the Abt Associates/SHOPS project will begin an evaluation of m4RH, which will help sustain it for another six to 12 months and provide one of the first rigorous evaluations of any family planning project in the growing mobile health field. Among USAID, FHI 360, and partners, sustainability and impact on contraceptive behavior remain the two key issues regarding m4RH as the fiveyear PROGRESS project (2008–2013) ends.

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Kenya country team member discusses text messaes at 2012 USAID Africa Bureau mobile technology meeting..

As the pilot project began winding down, a series of events helped elevate interest among donors and partners in continuing the service. In 2011, the DRH called together stakeholders working on mHealth projects to form an m4RH Task Force. The DRH-led m4RH Task Force developed terms of reference for the group and held quarterly meetings.

Various partners expressed interest in incorporating m4RH into their own work after the pilot period ended. How to sustain the project was a concern among partners. Sustaining the project involves basic costs, including leasing the short code from the telephone companies, paying SMS fees, and storing data automatically collected from users. The m4RH Task Force also sought to identify synergies among existing mHealth projects and avoid duplication of services.

In 2012, USAID's Africa Bureau and East Africa office decided to host the third in a series of week-long regional meetings on the topic "Using Mobile Technology to Improve Family Planning and Health Programs." FHI 360 staff were among the leaders of the Kenya team at the meeting, held in Tanzania in November 2012. This process helped elevate the m4RH project among the Kenya team and throughout the region during the conference. Notably, the Kenya team was awarded the trophy for the best booth during the gallery walk, where all country teams had demonstrations of their mHealth projects available for viewing. The Kenya booth included information and discussions about m4RH.

Meanwhile, the Abt Associates/ SHOPS project agreed to work with the PROGRESS team to design an impact evaluation focusing on modern contraceptive use as a result of the m4RH program in Kenya. The evaluation will



Participant tests the m4RH application.





Get all the information you need about contraceptive methods

Simply SMS

- Learn about contraceptive methods
- · Decide which method is right for you
- Get reproductive health information
- Get clinic information

To access specific contraceptive methods simply text the following codes:



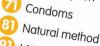
21 IUCD

Permanent methods

4) Injectable

Daily pills









PRIVATE & CONVENIENT

24 hours a day 7 days a week!















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utilize a randomized control design, using electronic randomization and most data collection conducted via SMS. As part of the evaluation, Abt Associates will expand promotion of the m4RH program and will fund the local technology partner Text to Change. The evaluation period may conclude by the end of 2013 or early 2014. FHI 360 staff will provide technical assistance on designing and implementing the research and on supporting partners' promotional efforts.

Next Steps

The m4RH project in Kenya has provided a new and innovative approach to sharing information on contraception. Young people and men, who are often hard to reach with traditional clinic- or even community–based services, use the m4RH service. Meanwhile, the Ministry of

Public Health and Sanitation is developing their approach to eHealth and mHealth and has established a committee of key stakeholders to address these issues. The Ministry has asked the former m4RH Task Force to join this committee in the hopes of building on work that has already been accomplished. The impact evaluation designed by Abt Associates/SHOPS is ensuring that funding and promotion of the m4RH system will continue through 2013. As this project unfolds, attention is needed to identify a long-term, sustainability plan for m4RH. The evidence from this evaluation on contraceptive behavior will be of great interest to those in Kenya and beyond who see m4RH as a unique and timely means of providing information to the growing population in Kenya and elsewhere.



Mobile phones provide a new means of reaching people with health information and support.

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